

Image# 201606109017555872

PAGE 1 / 6

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Mia Love			2. Candidate's FEC Identification Number H2UT04023		
(b) Address (number and street) 913 WEST GROUSE CIRCLE			<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code SARATOGA SPRINGS UT 84045			3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY		5. Office Sought House		6. State & District of Candidate UT 04	

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Friends of Mia Love		
(b) Address (number and street) PO Box 255		
(c) City, State, and ZIP Code Riverton UT 84065		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Republicans Inspiring Success & Empowerment Project (RISE PROJECT)		
(b) Address (number and street) PO Box 2485		
(c) City, State, and ZIP Code Springfield VA 22152		

*I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.*

Signature of Candidate Mia Love  [Electronically Filed]	Date 06/10/2016
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

FEC Form 2 (Rev. 02/2003)

Page 2 / 6

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Republicans Inspiring Success &amp; Empowerment Project (RISE PROJECT)

(b) Address (number and street)

PO Box 2485

(c) City, State and ZIP Code

Springfield

VA

22152

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

COMMITTEE TO PROTECT PROSPERITY AND FREE ENTERPRISE

(b) Address (number and street)

PO BOX 30844

(c) City, State and ZIP Code

BETHESDA

MD

20824

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Republicans Inspiring Success &amp; Empowerment Project (RISE PROJECT)

(b) Address (number and street)

PO Box 2485

(c) City, State and ZIP Code

Springfield

VA

22152

**FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

FEC Form 2 (Rev. 02/2003)

Page 3 / 6

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

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**COMMITTEE TO PROTECT PROSPERITY AND FREE ENTERPRISE**

(b) Address (number and street)

PO BOX 30844

(c) City, State and ZIP Code

BETHESDA

MD

20824

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

**TEAMPAC**

(b) Address (number and street)

PO BOX 9891

(c) City, State and ZIP Code

ARLINGTON

VA

22219

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

**Republicans Inspiring Success & Empowerment Project (RISE PROJECT)**

(b) Address (number and street)

PO Box 2485

(c) City, State and ZIP Code

Springfield

VA

22152

**FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

FEC Form 2 (Rev. 02/2003)

Page 4 / 6

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

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(a) Name of Committee (in full)

**COMMITTEE TO PROTECT PROSPERITY AND FREE ENTERPRISE**

(b) Address (number and street)

PO BOX 30844

(c) City, State and ZIP Code

BETHESDA

MD

20824

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

**TEAMPAC**

(b) Address (number and street)

PO BOX 9891

(c) City, State and ZIP Code

ARLINGTON

VA

22219

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

**Republicans Inspiring Success & Empowerment Project (RISE PROJECT)**

(b) Address (number and street)

PO Box 2485

(c) City, State and ZIP Code

Springfield

VA

22152

**FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

FEC Form 2 (Rev. 02/2003)

Page 5 / 6

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

**COMMITTEE TO PROTECT PROSPERITY AND FREE ENTERPRISE**

(b) Address (number and street)

PO BOX 30844

(c) City, State and ZIP Code

BETHESDA

MD

20824

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

**LOVE VICTORY COMMITTEE**

(b) Address (number and street)

824 S MILLEDGE AVENUE  
SUITE 101

(c) City, State and ZIP Code

ATHENS

GA

30605

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

**TEAMPAC**

(b) Address (number and street)

PO BOX 9891

(c) City, State and ZIP Code

ARLINGTON

VA

22219

**FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)**

FEC Form 2 (Rev. 02/2003)

Page 6 / 6

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:**This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

**ZELDIN-LOVE VICTORY FUND**

(b) Address (number and street)

824 S MILLEDGE AVE STE 101

(c) City, State and ZIP Code

ATHENS

GA

30605

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

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(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

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